

SEP. 29. 2006 8:34AM

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PART B - FEE(S) TRANSMITTAL

NO. 809

P. 2

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SEP 29 2006

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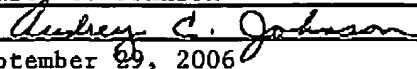
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Audrey C. Johnson

(Depositor's name)



(Signature)

September 29, 2006

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/713,535	11/12/2003	Alan Martin Allgeier	PT1615USNA	9320

TITLE OF INVENTION: USE OF MODIFIERS IN A DINITRILE HYDROGENATION PROCESS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	10/12/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
SACKEY, EBENEZER O	1626	558-459000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page: 11/32/2006 TBESHAH2 00022319 503223 10713535

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 01 FC:1501

(2) the name of a single firm (having the name of a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

INVISTA NORTH AMERICA S.A R.L.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Three Little Falls Centre - Rm. 1052  
2801 Centerville Road  
Wilmington, DE 19808

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

## 4a. The following fee(s) are submitted:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies

## 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

☐ A check is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-3223 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature


Date September 29, 2006

Typed or printed name

Charles E. Krukiel

Registration No.

27,344

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